APPLICATION COAL MINE SURFACE BLASTER CERTIFICATION UTAH DIVISION OF OIL, GAS AND MINING

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17AA (001) 337-37 - 0	
Applicant Social Security No	Age Date of Birth
2. Name	3. Applying for: (check one) 40-hr. Coal Mine Surface Blaster Training, Examination, and Certification. 8-hr. Coal Mine Surface Blaster Training, Examination, and Recertification. 40-hr. Coal Mine Surface Blaster Training, Examination, and Certificate of Completion.
4. Experience: (Rule R645-105-311 requires each certified blaster to have had one year of practical field experience in blasting.)	
A. Describe your practical field experience in blasting. S. Current Certification(s), if any: Title	B. Who supervised your field experience? Name Title Company
Issued by	
6. Certification: All of the information which has been provided in this application is true and accurate to the best of my knowledge and belief. If certified as a Coal Mine Surface Blaster, I anticipate using this certification on mine sites regulated by or under construction by the Utah Division of Oil, Gas and Mining. Signed Date Applicant	7. Experience Certification: I certify that the practical field experience discussed in block number four (4) above was under my supervision. Signed Date Supervisor Name Date Telephone Number (W) (H)
Division use only: I have examined this applicant's record of training, examination scores, and experience and recommend that he/she be □ certified □ recertified or □ rejected as a Coal Mine Surface Blaster, or □ I recommend that he/she be issued a certificate of completion for 40 hours of blaster training and successfully passing the examination.	
Signed	Date